

## Deferred Revenue Form

**Use this form when cash payments were received during FY22 but pertain to FY23 activity. MSU has an obligation to perform and has not yet earned the payment. Income will be reversed in FY22 and posted in FY23**

Department: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Transaction: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

Does the income relate to FY23 activity?    Yes    No    Dates of event \_\_\_\_\_

SEQ	JRNL TYP	INDEX	ACCT	AMOUNT		Title of event revenue received for
1	JE16				C	
2	JE16				C	
3	JE16				C	
4	JE16				C	
5	JE16				C	
6	JE16				C	

Authorized  
Signature: \_\_\_\_\_

**\*\*\*Please attach documentation to support amount of deferral\*\*\***

**Email completed form to [UBShelp@montana.edu](mailto:UBShelp@montana.edu). Please contact Hannah Friedrich with any questions at [hannah.friedrich@montana.edu](mailto:hannah.friedrich@montana.edu).**